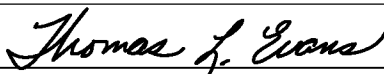


<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/077,548
		Filing Date	February 14, 2002
		First Named Inventor	Swatee N. Surve
		Art Unit	3765
		Examiner Name	Robert H. Muromoto, Jr.
Total Number of Pages in This Submission	21	Attorney Docket Number	005127.00138

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">Second Request For Reinstatement Of Appeal</p>		
<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">Remarks</td> <td> <p>Please charge any fees that are necessary to maintain to the pendency of this application, including any fees under 37 CFR §1.16 or §1.17, to deposit account number 19-0733.</p> </td> </tr> </table>			Remarks	<p>Please charge any fees that are necessary to maintain to the pendency of this application, including any fees under 37 CFR §1.16 or §1.17, to deposit account number 19-0733.</p>
Remarks	<p>Please charge any fees that are necessary to maintain to the pendency of this application, including any fees under 37 CFR §1.16 or §1.17, to deposit account number 19-0733.</p>			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas L. Evans, Reg. No. 35, 805
Signature	
Date	August 2, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
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